

**GIC Health Plan Rates**  
**MONTHLY RATES as of Fiscal Year 2019, JULY 1, 2018**  
**FOR THE TOWN OF WINCHENDON ENROLLEES**

**Active Employees, Retirees and Survivors without Medicare**

	Employee and Non-Medicare Retiree/ Survivor Pays Monthly %	Employee and Non-Medicare Retiree/ Survivor Pays Monthly \$	Employee and Non-Medicare Retiree/ Survivor Pays Monthly \$
<b>Health Plan</b>	<b>Emp/Ret</b>	<b>Individual Coverage</b>	<b>Family Coverage</b>
Fallon Health Direct Care (HMO)	<b>35/50%</b>	198.20/283.14	498.05/711.49
Fallon Health Select Care (HMO)	<b>40/50%</b>	306.25/382.81	742.22/927.77
Harvard Pilgrim Independence Plan (PPO)	<b>40/50%</b>	330.67/413.34	803.76/1004.70
Harvard Pilgrim Primary Choice Plan (HMO)	<b>40/50%</b>	241.29/301.61	611.64/764.55
Health New England (HMO)	<b>35/50%</b>	192.84/275.48	457.29/653.26
NHP Care (HMO) ( <i>Neighborhood Health Plan</i> )	<b>35/50%</b>	203.15/290.21	523.64/748.05
Tufts Health Plan Navigator (PPO)	<b>40/50%</b>	297.38/371.72	724.75/905.93
Tufts Health Plan Spirit (HMO-type)	<b>35/50%</b>	197.48/282.12	474.40/677.71
UniCare State <i>Indemnity</i> Plan/Basic with <i>CIC (Comprehensive)</i>	<b>40/50%</b>	423.36/529.20	937.38/1171.72
UniCare State <i>Indemnity</i> Plan/Basic without <i>CIC (Non-Comprehensive)</i>	<b>40/50%</b>	403.87/504.83	893.01/1116.26
UniCare State <i>Indemnity</i> Plan/Community Choice (PPO-type)	<b>35/50%</b>	175.76/251.08	432.78/618.26
UniCare State <i>Indemnity</i> Plan/PLUS (PPO-type)	<b>40/50%</b>	278.44/348.04	661.82/827.27

**Retirees and Survivors with Medicare**

	Retiree and Survivor Pays Monthly Per Person	
<b>Health Plan</b>	<b>%</b>	<b>\$</b>
Harvard Pilgrim Medicare Enhance (Indemnity)	50%	191.29
Health New England MedPlus (HMO)	50%	193.41
Tufts Health Plan Medicare Complement (HMO)	50%	180.86
Tufts Health Plan Medicare Preferred* (HMO)	50%	166.00
UniCare State <i>Indemnity</i> Plan/Medicare Extension (OME) with <i>CIC (Comprehensive)</i>	50%	189.83
UniCare State <i>Indemnity</i> Plan/Medicare Extension (OME) without <i>CIC (Non-Comprehensive)</i>	50%	184.29

**\*Benefits and rates of Fallon Senior Plan and Tufts Health Plan Medicare Preferred are subject to federal approval and may change on January 1, 2017.**

*Rates are calculated by the Town of Winchendon Human Resources Department*

**RATE QUESTIONS? CALL: 978-297-0152**

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**RETIREE DENTAL PLAN (*if applicable*) GIC will provide dollar amounts**

<b>GIC RETIREE DENTAL PLAN</b>	
Includes 0.35% Administrative Fee	
Monthly GIC Plan Rates as of July 1, 2018	
\$1,250 Maximum Annual Benefit per Member	
<b>Coverage Type</b>	<b>Retiree Pays Monthly</b>
Single	\$30.01
Family	\$72.30

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